

County: Grant
FENNIMORE GOOD SAMARITAN CENTER
1850 11TH STREET
FENNIMORE

Facility ID: 3430

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53809 Phone: (608) 822-6100
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 68
Total Licensed Bed Capacity (12/31/01): 74
Number of Residents on 12/31/01: 57

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? Yes
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 61

Nonprofit Church/Corporation
Skilled
Yes
Yes
Yes
61

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		35.1
Supp. Home Care-Personal Care	No					1 - 4 Years		36.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		28.1
Day Services	Yes	Mental Illness (Org./Psy)	24.6	65 - 74	3.5			-----
Respite Care	Yes	Mental Illness (Other)	3.5	75 - 84	35.1			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	45.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.8	95 & Over	15.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	7.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	24.6	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	7.0		-----	RNs		8.8
Referral Service	No	Diabetes	14.0	Sex	%	LPNs		15.5
Other Services	No	Respiratory	3.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.0	Male	31.6	Aides, & Orderlies		42.2
Mentally Ill	No		-----	Female	68.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Skilled Care	4	100.0	290	27	81.8	95	0	0.0	0	17	85.0	120	0	0.0	0	0	0.0	48	84.2
Intermediate	---	---	---	6	18.2	79	0	0.0	0	3	15.0	114	0	0.0	0	0	0.0	9	15.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	4	100.0		33	100.0		0	0.0		20	100.0		0	0.0		0	0.0	57	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	17.4	Daily Living (ADL)	Independent			
Private Home/With Home Health	2.9	Bathing	0.0	86.0	14.0	57
Other Nursing Homes	10.1	Dressing	29.8	59.6	10.5	57
Acute Care Hospitals	69.6	Transferring	47.4	35.1	17.5	57
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	38.6	42.1	19.3	57
Rehabilitation Hospitals	0.0	Eating	71.9	17.5	10.5	57
Other Locations	0.0	*****				
Total Number of Admissions	69	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.3	Receiving Respiratory Care		10.5
Private Home/No Home Health	31.2	Occ/Freq. Incontinent of Bladder	49.1	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	7.8	Occ/Freq. Incontinent of Bowel	28.1	Receiving Suctioning		1.8
Other Nursing Homes	3.9			Receiving Ostomy Care		1.8
Acute Care Hospitals	5.2	Mobility		Receiving Tube Feeding		1.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	5.3	Receiving Mechanically Altered Diets		43.9
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	51.9	With Pressure Sores	5.3	Have Advance Directives		70.2
Total Number of Discharges		With Rashes	3.5	Medications		
(Including Deaths)	77			Receiving Psychoactive Drugs		50.9

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities % Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds	82.4	92.7	0.89	86.4	0.95	85.8	0.96	84.6	0.97
Current Residents from In-County	87.7	74.5	1.18	69.6	1.26	69.4	1.26	77.0	1.14
Admissions from In-County, Still Residing	24.6	27.9	0.88	19.9	1.24	23.1	1.06	20.8	1.18
Admissions/Average Daily Census	113.1	95.2	1.19	133.4	0.85	105.6	1.07	128.9	0.88
Discharges/Average Daily Census	126.2	95.2	1.33	132.0	0.96	105.9	1.19	130.0	0.97
Discharges To Private Residence/Average Daily Census	49.2	31.4	1.57	49.7	0.99	38.5	1.28	52.8	0.93
Residents Receiving Skilled Care	84.2	91.4	0.92	90.0	0.94	89.9	0.94	85.3	0.99
Residents Aged 65 and Older	100	97.3	1.03	94.7	1.06	93.3	1.07	87.5	1.14
Title 19 (Medicaid) Funded Residents	57.9	64.2	0.90	68.8	0.84	69.9	0.83	68.7	0.84
Private Pay Funded Residents	35.1	29.6	1.19	23.6	1.49	22.2	1.58	22.0	1.59
Developmentally Disabled Residents	0.0	0.7	0.00	1.0	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	28.1	36.0	0.78	36.3	0.77	38.5	0.73	33.8	0.83
General Medical Service Residents	14.0	21.3	0.66	21.1	0.67	21.2	0.66	19.4	0.72
Impaired ADL (Mean)	38.6	49.0	0.79	47.1	0.82	46.4	0.83	49.3	0.78
Psychological Problems	50.9	50.2	1.01	49.5	1.03	52.6	0.97	51.9	0.98
Nursing Care Required (Mean)	8.6	7.5	1.14	6.7	1.27	7.4	1.15	7.3	1.17